

Week 9

Monday, May 2, 2016

Social disadvantage (part two)

Lecture notes

- **Absolute poverty** refers to a set standard which is the same in all countries and which does not change over time, e.g. living on less than \$2 a day.
- **Relative poverty** refers to a standard which is defined in terms of the society in which an individual lives and which therefore differs between countries and over time, e.g. living on less than 50% of average income.
- Males have a mortality rate that is 1.5 times as high as the rate for females.
- Health and disease are socially patterned. The factors impacting on health go way beyond disease.
- If everyone was to experience the same mortality rate as the least disadvantaged, it would decline.
- Factors on the creation of the **social pattern**:
 - artefact; ensure we're comparing apples with apples, not apples with oranges.
 - natural selection, survival of the fittest; different genetics; continuation of initial conditions.
 - access to health care; we have a universal system.
 - behavioural factors; the least disadvantaged you are the more it explains your health; secondary to others
 - structural explanations; poverty, discrimination, lack of education, poor housing and poor nutrition.
- Health determinants can be described as those factors that raise or lower the level of health.
- Gordon (1999) provides ten tips on addressing health inequalities.
- Challenges facing **health policy makers**: ideology, medical dominance and funding.
- Wicked problems are difficult to define, may be socially complex and are often multi-causal.
- Three **levels of influence** on the social determinants:
 - upstream; macroeconomic; government policy; 'large potential'.
 - midstream; psycho-social factors and health behaviours; 'consequence of upstream factors'.
 - downstream; illness and disease; 'the lived experience of health inequality'.
- There are six strategies for policy and action (as addressed from the online module).
- Social prescribing is a formal process of referring patient to relevant community services. This is a response that health professionals can improve on.

Pre-reading for the lecture

Reading 1: Wolff, J (2011) 'How should governments respond to the social determinants of health?' Preventive Medicine, 53, 253-255. Available from the 'library link tab'.

Reading 2: Baum, F., Laris, P., Fisher, M., Newman, L. and MacDoughall, C. (2013) "'Never mind the logic, give me the numbers": Former Australian health ministers' perspectives on the social determinants of health', Social Science and Medicine, 87, 138-146. Available from the 'library link tab'.